

Condition 4 – Update Top QA Section

The following preconditions must be met:

1. Successful log into MOHSAIC TB Disease application.
2. Search and select client
3. Select condition in tree.

Business Rules:

1. Conditions are viewable based on security – TB roles include TB DISEASE, TB INFECTION, and MOTT; CD roles include other conditions such as ANIMAL BITES, HEPATITIS, SHIGELLOSIS, etc.
2. The top piece may only be updated by QA or ADMIN users.

QA or ADMIN USER – The update button is available for these roles.

This screenshot shows the 'Update' button in the 'Conditions' section of the application. The user is logged in as 'JUDY DANE' and is viewing the 'Conditions' page. The 'Update' button is visible in the top right corner of the 'Conditions' section.

USER – The top piece cannot be changed by this role.

This screenshot shows the 'Update' button in the 'Conditions' section of the application. The user is logged in as 'JUDY DANE' and is viewing the 'Conditions' page. The 'Update' button is disabled (grayed out) in the top right corner of the 'Conditions' section.

Procedure 1: Click CDC Case Definitions link. (ALL ROLES)

Expected System Response: The CDC case definitions web page will display

This screenshot shows the CDC Case Definitions web page. The page displays a list of case definitions for various diseases, including Acquired Immunodeficiency Syndrome (AIDS), Amebiasis (Entamoeba histolytica), Anaplasma phagocytophilum, Anthrax (Bacillus anthracis), Arboviral Diseases, neuroinvasive and nonneuroinvasive, Aseptic Meningitis (Viral Meningitis), and Botulism. The page also includes a search bar and a list of links for more information.

Procedure 2: Click the X in the top right corner.

WEBSURV TEST

Expected System Response: The Condition Screen is visible.

State of Missouri
DEPARTMENT OF HEALTH AND SENIOR SERVICES

Home Person Organization Search

Instructions

* Denotes required field.

Condition for JULY, TENTH (Party ID = 382397008)

Modified Date: 7/10/2008 By: SWADM04 Condition ID: 382399423 NETSS ID: 356212532

QA Complete: * Month Year Counted: * 06 (mm) 2008 (yyyy)

Counted Jurisdiction: * NEWTON Counted Jurisdiction Type: * CASE

Manage Jurisdiction: * NEWTON Manage Jurisdiction Type: * CASE

Condition Status: * [CDC Case Definitions](#)

Address: [Person Address\(s\)](#) [Institution Address](#) [Remove](#)

Address: GRANBY HOUSE
420 W LYON DR NEOSHO, MO
64850-9194 NEWTON USA

Condition Name: *

Date Received by LPHA: * 06/25/2008 (mmddyyyy) Date of Birth: 07/10/1980

Date of Initial Interview: (mmddyyyy) Age at Diagnosis: 27 YEARS

Date of Diagnosis: * 06/20/2008 (mmddyyyy) Diagnosis Notification:

Hospitalized of this Illness: YES Pregnant at Diagnosis:

Died of this Illness: NO Date of Death:

Other Associated Cases: YES

Outbreak Associated: YES Type of Outbreak:

State Outbreak ID: Outbreak Comments:

Severity of Illness: *

Procedure 3: Click the Update button. (QA and ADMIN users)

Expected System Response: The top piece of the condition screen is available for editing.

State of Missouri
DEPARTMENT OF HEALTH AND SENIOR SERVICES

Home Person Organization Search

Instructions

* Denotes required field.

Condition for JULY, TENTH (Party ID = 382397008)

Modified Date: 7/10/2008 By: SWADM04 Condition ID: 382399423 NETSS ID: 356212532

QA Complete: * Month Year Counted: * 06 (mm) 2008 (yyyy)

Counted Jurisdiction: * NEWTON Counted Jurisdiction Type: * CASE

Manage Jurisdiction: * NEWTON Manage Jurisdiction Type: * CASE

Condition Status: * [CDC Case Definitions](#)

Address: [Person Address\(s\)](#) [Institution Address](#) [Remove](#)

Address: GRANBY HOUSE
420 W LYON DR NEOSHO, MO
64850-9194 NEWTON USA

Condition Name: *

Date Received by LPHA: * 06/25/2008 (mmddyyyy) Date of Birth: 07/10/1980

Date of Initial Interview: (mmddyyyy) Age at Diagnosis: 27 YEARS

Date of Diagnosis: * 06/20/2008 (mmddyyyy) Diagnosis Notification:

Hospitalized of this Illness: YES Pregnant at Diagnosis:

Died of this Illness: NO Date of Death:

Other Associated Cases: YES

Outbreak Associated: YES Type of Outbreak:

State Outbreak ID: Outbreak Comments:

Severity of Illness: *

Procedure 4: Change QA Complete and click SAVE.

- QA Complete
- Counted Jurisdiction Type
- Month Year Counted
- Manage Jurisdiction
- Counted Jurisdiction
- Manage Jurisdiction Type

WEBSURV TEST

Expected System Response: The condition screen returned and the update button is available on the top piece.

State of Missouri
DEPARTMENT OF HEALTH AND SENIOR SERVICES

Username: swadm04 Agency: DOH-CENTRAL OFFICE

Home Person Organization Search Instructions

Y, TENTH
Locators
History
Provider Roles
NDITIONS
Add Condition
VARICELLA (CHICKENPOX) SPECIAL C
Fresh Tree

* Denotes required field.

Condition for JULY, TENTH (Party ID = 382397008)

Modified Date: 7/10/2008 By: SWADM04 Condition ID: 382399423 NETSS ID: 356212532

QA Complete: * YES Month Year Counted: * 06 (mm) 2008 (yyyy)

Counted Jurisdiction: * NEWTON Counted Jurisdiction Type: * CASE

Manage Jurisdiction: * NEWTON Manage Jurisdiction Type: * CASE

Condition Status: * CONFIRMED (LAB CONFIRMED) CDC Case Definitions **Update**

Person Address(s) Institution Address Remove

Address: GRANBY HOUSE
420 W LYON DR NEOSHO, MO
64850-9194 NEWTON USA

Condition Name: * VARICELLA (CHICKENPOX) SPECIAL CIRCUMSTANCES

Date Received by LPHA: * 06/25/2008 (mmddyyyy) Date of Birth: 07/10/1980

Date of Initial Interview: (mmddyyyy) Age at Diagnosis: 27 YEARS

Date of Diagnosis: * 06/20/2008 (mmddyyyy) Diagnosis Notification:

Hospitalized of this Illness: YES Pregnant at Diagnosis:

Died of this Illness: NO Date of Death:

Other Associated Cases: YES

Outbreak Associated: YES Type of Outbreak:

State Outbreak ID: Outbreak Comments:

Severity of Illness: * < 50 LESIONS

Local intranet 100%

Test Complete.